65000010354

(Requestor's Name)				
(Address)				
3137 NET 163rd 5t. (Address)				
M. Miami Boh, A 38160 (City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
105-70354				
Office Use Only				



400057959984

07/29/05--01027--015 **25.00

05 JUL 29 AM II: 06

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limite	d liability company is:	Citrus Holding Group LLC		
		mpany is :		
3137 NE 163rd Street,	•			
February 1, 2005	_	L05000010354	į ž	
3. Date of filing/registration in Florida 4. Document number				
5. The name of the register Florida Department of		ered office address as shown o	on the records of the	
	3137 NE 163rd Stre	Name et		
	North Miami Beach,	Address FL 33160 State and Zip	TALE 05	
City, State and Zip 6. The name and address of the new registered agent and/or office: Natalia Wolf				
	Natalia Wolf			
	3137 NE 163rd Stre	lame et	AM 11: 06 EE. FLORID	
	Florida street address	(P.O. Box NOT acceptable)	TORK!	
	North Miami Beach	_{FL} 33160	DM 6	
City, State and Zip				
confirmed that after the cl	nange or changes are ma the registered agent will reby confirmed that the d liability company or a of the limited liability co	ander the laws of the State of F ade, the Florida street address of the identical. Or, in the case change(s) was/were authorized is otherwise provided in the armany.	of the registered office	
Natalia Wolf				
(Printed or typed name of signee)				
I hereby accept the appo- comply with the provision and I am familian with an Chapter 608, F.B. Or, if a address, I hereby confirm (Signature of Registered Agent)	intment as registered ag s of all statutes relative d accept the obligations his document is being fi that the limited liability	rent and agree to act in this ca to the proper and complete pe to fmy position as registered a iled to merely reflect a change y company has been notified in	pacity. I further agree to reformance of my duties, igent as provided for in in the registered office writing of this change.	
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314				

FILING FEE: \$25.00

INHS18(10/99)